

# Transformative care through collaboration

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OPCC Lamp Community

# Transformative Care Through Collaboration

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- So, how do we do this?
- What are our difficulties?
- And what are our successes?

# Learning Objectives

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- Attendees will be able to understand how to implement the principals of harm reduction strategies while working with tri morbid patients.
- Attendees will be able to list the various methods of coordinating patient care with mainstream services.
- Attendees will be able to utilize a model of care to stay with a patient from the street into housing.

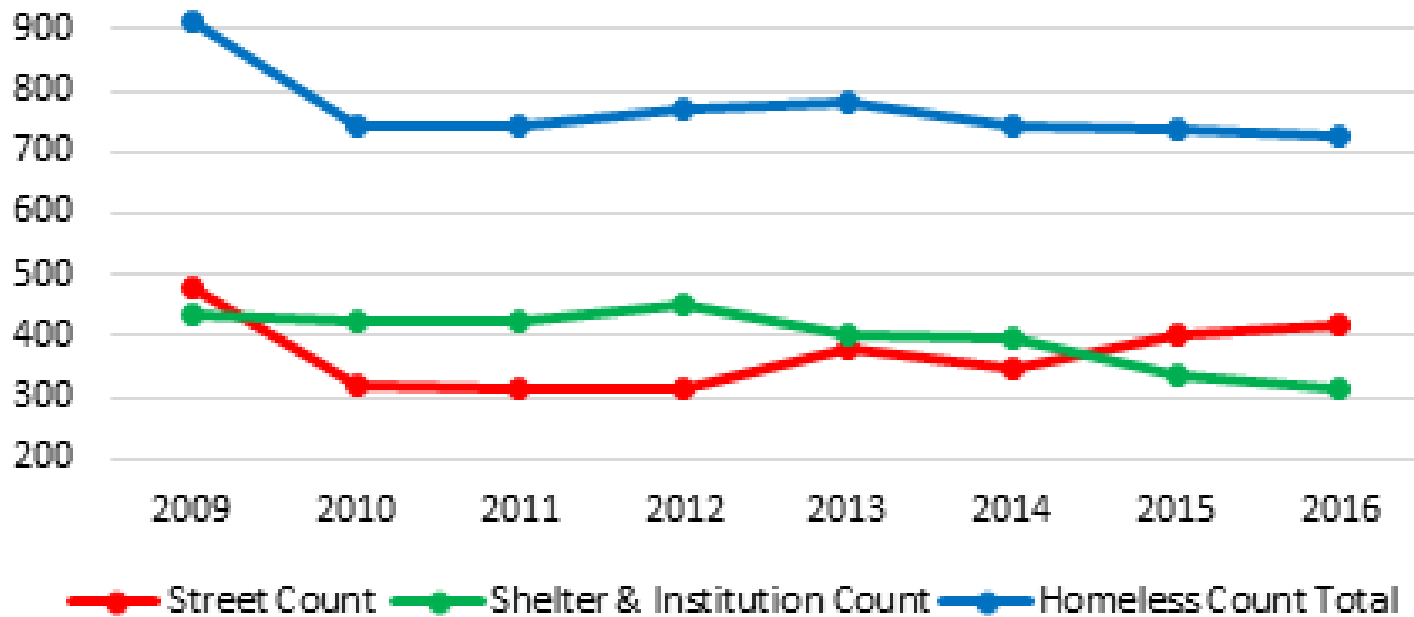
# The City of Santa Monica

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How does the City of Santa Monica approach homelessness?

- **Service prioritization** for the most chronic/vulnerable
- **Interagency service coordination** (City departments, regional partners, local service partners, etc.)
- **Significant investment in permanent solutions** (PSH, assertive/integrated services)
- **Alternative programs** (HLP Team, Homeless Court, integrated mobile health/street medicine, Project Homecoming)
- **Housing First & Harm Reduction**

## Santa Monica Homeless Count Results 2009-2016



# OPCC Provides 7 Core Integrated Services

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## **Core Services:**

- Housing (interim and permanent supportive)
- Medical Care
- Mental Health Care (including psychiatry)
- Domestic Violence Services
- Substance Addiction Treatment
- Income Services
- Wellness and Life Skills Programs

# OPCC Clients:

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- 95% are living with a mental illness
- 65% have significant physical health problems
- 50% have a substance addiction
- 87% of chronically homeless women are victims of molestation, domestic violence or sexual assault
- 70% of young people who become homeless do so to escape physical or sexual abuse in their home
- 65% of former foster youth end up homeless





# Over the next year, OPCC will achieve the following outcomes:

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- Over 5,000 individuals will be served.
- Of these 5,000 individuals, at least 2,000 will receive some form of domestic violence services, and at least 3,000 will receive some form of services related to being homeless or indigent.
- OPCC will provide housing (either interim or permanent) to over 1,000 people, along with accompanying supportive services.
- OPCC will permanently house over 275 individuals.
- Over 95% of clients who are permanently housed will retain their housing indefinitely.
- Over 75% of clients who enter programs without benefits and are entitled to benefits will be assisted in acquiring those benefits.
- Over 1,000 clients will receive some form of mental health intervention, and over 750 will receive ongoing psychotherapy.
- Of those receiving mental health interventions, over 75% will show improvement in mental health functioning within 3 months of treatment initiation.
- Over 250 clients will receive street outreach services.
- Over 300 clients will receive onsite healthcare, and countless others will be referred to Venice Family Clinic, which will provide them with healthcare.
- Over 60 clients (without homes) will receive onsite respite care after being discharged from local hospitals for an acute medical condition or injury and will be assisted to obtain housing while in respite care.

# Interdisciplinary Street Based Teams

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- Multiple interdisciplinary teams that offer wrap around services that incorporate street medicine that ranges from connection and counseling to psychiatry and medical care utilizing whole person care.
- Extends from the streets to interim housing and into permanent housing

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Now, how do we reach our clients?



TRUST

**Takes years to build,  
seconds to break and  
forever to repair.**

A scenic view of a turquoise lake in a mountain valley. In the foreground, three people are seen from behind, ziplining over the lake. The lake is surrounded by lush green mountains and a concrete dam in the distance. The sky is clear and blue.

Connection is why we're here. We are hardwired to connect with others, it's what gives purpose and meaning to our lives, and without it there is suffering. ~ Brené Brown

# Motivation

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- Persistence
  - Show up frequently and consistently
  - What's our street cred?
  - Be open-minded
  - Plant Seeds
  - Recognize clients fear of change and how do we sell change?

# Enforcement

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- How do we talk about enforcement?
- And what does this mean?

**! POLICE !**

- Homeless Liaison Police Team (HLP Team)
- Psychiatric Emergency Response Team (PMRT)

# Homeless Court

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- Treatment, not custody
- Collaboration between Court, City, and local service providers
- Providing pathways to treatment and housing



# Outreach to Housing

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## **OUTREACH**

- Whatever it takes, wherever it is.
- Traditional homeless outreach strategies  
PLUS creativity and consistency.

# Outreach to Housing



## WITHIN THE COMMUNITY

Connections are maintained through the agency collaborations

- If someone is sick what do we do?
  - Community clinic collaboration and partnership
  - Local hospital connections
  - Social Action Task Force
- If we need City support how do we get that?
  - SMPD
  - SMFD
  - Chronic Homeless Project (CHP)

# Outreach to Housing

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## **WITHIN THE COMMUNITY**

Connections are maintained through the agency collaborations

- If someone needs mental health care?
  - LPS Licensed clinicians on staff
  - DMH PMRT
  - Exodus
  - Law enforcement



# Outreach to Housing

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## THE INTERIM HOUSING ENVIRONMENT

We have four harm reduction interim housing locations and two domestic violence locations. We asked our residents, “What is it like to be in our interim housing programs?”



humbling

grateful

nice clean POSITIVE

hope cake exuberating amazing

scary happy cozy ambiguous

opportunity fair contentment

drama uplifting fantastic

hell secure uncomfortable

friendly peaceful

stressful awesome

love thinking unnerving

headache

encouragement

different

HOME

safe

helpful

# Outreach to Housing

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## **PERMANENT SUPPORTIVE HOUSING**

- Medical care, mental health treatment, and substance abuse services through home visits
- Even after housing...**WHATEVER IT TAKES**
- Safety considerations

# Whatever It Takes

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The role of the RN and the multiple hats we wear  
when we are meeting people where they are at





[https://www.youtube.com/watch?v=\\_BRp7ezUqbl](https://www.youtube.com/watch?v=_BRp7ezUqbl)

# Difficulties and Successes

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Break Out Session

# Case Presentation

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55 yr old, AA, FM

Dx: Schizophrenia, Alcohol Dependence

Medical: HTN, Chronic Cellulitis

Homeless in Santa Monica for 8 years.

Agreed to wraparound services in 2012.

Moved into SAMOSHEL in 2014.

Moved into a project based unit in 2015.



# Case Presentation

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31 yr old, AA, M

Mental Health Dx: PTSD, Depression

Medical: Spinal bifida

Substance use: Crack cocaine, Cannabis

Homeless in Santa Monica 8 years. Entered interim housing in 2015. Agreed to IMHT/wrap around services in 2016. At times nonverbal, guarded, and resistant.

# Case Presentation

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55yr old, Hispanic, M

Mental Health Dx: Depression

Medical: HTN, Type II Diabetes, wheelchair bound

Substance use: Alcohol

Homeless in Santa Monica 15+yrs. Lived in interim housing on and off for 15yrs. Entered skilled nursing home in 2013. Died due to hypotension and complications to Type II Diabetes in 2013

# Mindfulness

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**In every day, there are 1,440 minutes.  
That means we have 1,440 daily  
opportunities to make a positive  
impact.**  
**Les Brown**